

WORKSHEET FOR POOL/SPA PERMIT APPLICATION



CITY OF NEWPORT BEACH  
BUILDING DIVISION

PLEASE PRINT

1. PROJECT ADDRESS (NOT MAILING ADDRESS)		FLOOR	SUITE NO.
LEGAL DESCRIPTION			No. UNITS
LOT	BLOCK	TRACT	

2. DESCRIPTION OF WORK _____			
_____			
_____ ESTIMATED \$ VALUATION _____			
SWIMMING POOL <input type="checkbox"/>		SPA <input type="checkbox"/>	PORTABLE SPA <input type="checkbox"/>
		OTHER <input type="checkbox"/>	

3. OWNER'S NAME		LAST	FIRST	PHONE NO.	
OWNER'S ADDRESS			CITY	STATE	ZIP
4. APPLICANT'S NAME		LAST	FIRST	PHONE NO.	
APPLICANT'S ADDRESS			CITY	STATE	ZIP
5. ARCHITECT/DESIGNER'S NAME		LAST	FIRST	STATE LIC. NO.	
ARCHITECT/DESIGNER'S ADDRESS			CITY	STATE	ZIP
			PHONE NO.		
6. ENGINEER'S NAME		LAST	FIRST	STATE LIC. NO.	
ENGINEER'S ADDRESS			CITY	STATE	ZIP
			PHONE NO.		
7. CONTRACTOR'S NAME			LIC. CLASS	STATE LIC. NO.	
CONTRACTOR'S ADDRESS			CITY	STATE	ZIP
			PHONE NO.		
APPLICANT'S E-MAIL ADDRESS				NEWPORT BUS. LIC. NO.	

POOL / SPA ITEMS	NO.	
WATER SERVICE		
GAS SERVICE		
WATER HEATERS		
P-TRAP		
ANTI-SYPHON VALVE		
ELECTRIC SYSTEM		
OTHER MISC.		

OFFICE USE ONLY	
PERMIT NO. _____	
PLAN CHECK NO. _____	
PLAN CHECK FEE \$ _____	